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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE erwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 09/872,252 / Filing Date May 31, 2001

TRANSMITTAL **FORM**

First Named Inventor David P. Anderson et al Art Unit 2154 Examiner Name Mohammad A. Siddiqi (to be used for all correspondence after initial filing) Attorney Docket Number 40988-P001P7 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)											
✓ Fee Transmittal Form	Drawing(s)		After A	Allowance Communication to TC							
Fee Attached	Licensing-related Papers			al Communication to Board peals and Interferences							
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	ress	(Appea Propri	al Communication to TC al Notice, Brief, Reply Brief) etary Information s Letter Enclosure(s) (please Identify):							
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	1									
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name Winsterd Sechrest & Min	ick P.C.										
Signature											
Printed name Kelly K. Korazik	/										
Date April 27, 2005	Reg	. No. 36,57	l								
CERTIFICATE OF TRANSMISSION/MAILING											
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown/thelow:											
Signature	ra Relle										
Typed or printed name Serena Beller			Date	April 27, 2005							

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (11-04)

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Complete if Known Effective on 10/01/2004. Patent fees are subject to annual revision. **Application Number** 09/872,25**2**/ FEE TRANSMITTAL Filing Date May 31, 2001 For FY 2005 David P. Anderson et al. First Named Inventor Mohammad A. Siddiqi Examiner Name Applicant claims small entity status. See 37 CFR 1.27 2154 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 510.00 Attorney Docket No. 40988-P001P7

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)				
✓ Deposit Account Deposit	redit Card	No	oney Order ne	2. EXTRA CLAIM FEES Fee Description Each claim over 20 Each independent claim over Multiple dependent claims		Fee (\$) 50 200 360	Small Entity Fee (\$) 25 100 180
Account Number Deposit Account Name Winstead Sechrest & Minick P.C.			For Reissues, each claim over more than in the original par For Reissues, each independen	tent nt claim	50	25	
The Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below			more than in the original patent 200 100 Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 or HP = x = HP = highest number of total claims paid for, if greater than 20				
Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments			Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3 Multiple Dependent Claims Fee (\$) Fee Paid (\$)				
to the above-identified deposit account.			Multiple Dependent Claims Fee (\$) Fee Paid (\$) Subtotal (2) \$				
Other (please identify): WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			1-month extension of time	120	Small Entity Fee (\$) 60	Fee Paid(\$)	
FEE CALCULATION		2-month extension of time 3-month extension of time	450	225	510.00		
1. BASIC FILING FEE	_	Small Entity Fee (\$)	Fee Paid(\$)	4-month extension of time 5-month extension of time	1,020 1,590 2,160	510 795 1,080	
Utility Filing Fee	790	395		Information disclosure stmt. fee	180	180	
Design Filing Fee	350	175		37 CFR 1.17(q) processing fee Non-English specification	50 130	50 130	
Plant Filing Fee	550	275		Notice of Appeal	500	250	
Reissue Filing Fee	790	395		Filing a brief in support of appeal Request for oral hearing	1,000	250 500	
Provisional Filing Fee	160	80		Other:			
Subjected (1/8_7			Subtotal (3) \$_510.00				
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